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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.

09/521,723

Confirmation No. 3713

**Applicant** 

Sam Mazza March 9, 2000

Filed TC/A.U.

2624

Examiner

Poon, King Y.

Docket No.

02471 (42390.P8970)

Customer No.:

008791

**RECEIVED** 

SEP 3 0 2004

Technology Center 2600

Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **AMENDMENT**

In response to the Office Action mailed April 21, 2004, please enter this amendment and consider the following remarks.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims that begins on page 3 of this paper.

Remarks begin on page 5 of this paper.

(to be used for all correspondence after initial filing)  First Named Inventor  Samuel Mazza  Art Unit  2624  SEP  Examiner Name  King Y. Poon  Technology  Attorney Docket Number  42390P8970  ENCLOSURES (check all that apply)  Fee Transmittal Form  Drawing(s)  Fee Attached  Licensing-related Papers  Amendment / Response  After Final  Petition to Convert a Provisional Application  Power of Attorney, Revocation  Status Letter		Application No.	09/521,723				
Art Unit 2624 SEP  Examiner Name King Y. Poon Technology  Attorney Docket Number 42390P8970  ENCLOSURES (check all that apply)  ENCLOSURES (check all that apply)  Fee Transmittal Form Drawing(s) After Allowance Communication to Group of Appeals and Interferences  Amendment / Response Petition After Final Affidavits/declaration(s) Provisional Application Provisional Application Provisional Application Status Letter  Extension of Time Request For Refund    Attorney Docket Number   42390P8970   Technology	TRANSMITTAL F	Filing Date	March 9, 2000	March 9, 2000			
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## Response to Missing Parts/ Incomplete Application Remarks Basic Filing Fee Declaration/POA Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Paul A. Mendonsa, Reg. No. 42,879 Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP Signature Date September 21, 2004 CERTIFICATE OF MAILING/TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box

Date

September 21, 2004

Deborah L. Higham

1450, Alexandria, VA 22313-1450.

Typed or printed name

Signature



## RANSMITTAL Complete if Known Application Number 09/521,723 Filing Date March 9, 2000 First Named Inventor Samuel Mazza Effective 10/01/2004. Patent fees are subject to annual revision. **Examiner Name** King Y. Poon Applicant claims small entity status. See 37 CFR 1.27. 2624 42390P8970 Art Unit **TOTAL AMOUNT OF PAYMENT** (\$) 420.00 Attorney Docket No.

						1.250	10270		
METHOD OF PAYMENT (check all that apply)	)				FE	E CALCULATIO	N (continue	ed)	
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Charge any additional fee(s) or underpayment of fees as required under 3 CFR §§ 1.16, 1.17, 1.18 and 1.20.	37	1805	1,840*	1805	1,840 '		of SIR after		<del></del>
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		1251	110	2251	55	Extension for reply within Extension for reply within			420.00
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1001 770 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee		1402	330	2402	165	Filing a brief in support	of an appeal		
1003 530 2003 265 Plant filing fee		1403	290	2403	145	Request for oral hearing	1		
1004 770 2004 385 Reissue filing fee		1451	1,510	2451	1,510	Petition to institute a put	blic use proceedi	ing	
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		1501 1502	1,330 480	2501 2502	665 240	Utility issue fee (or reiss Design issue fee	sue)		
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Fee Fee Fee Fee <u>Fee Description</u> Code (\$)		4000	770	4000	385	Filing a submission after			
1202 18 2202 9 Claims in excess of 20		1809	,,,,	1809	300	(37 CFR § 1.129(a))			
1201 86 2201 43 Independent claims in excess of 3		1810	770	2810	385	For each additional inver- examined (37 CFR § 1.1			
1203 290 2203 145 Multiple Dependent claim, if not paid		1801	770	2801	385	Request for Continued E		≣)	
1204 86 2204 43 **Reissue independent claims over origin patent	nai	1802	900	1802	900	Request for expedited ex		•	
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**or number previously paid, if greater, For Reissues, see below									
SUBMITTED BY			anint-nti-	n Ma			Comp	lete (if applicat	
Name (Print/Type) Paul A. Mendonsa			egistratio tomev/Agei		4	12,879	<sup>r</sup> elephone	(503) 439	-8778

Name (Print/Type) Paul A. Mendonsa Registration No. (Attorney/Agent) 42,879 Telephone (503) 439-8778

Signature Date 09/21/04